Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information.

| Do not use this form to update in | formation. | | | | |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------------|----------------------------------|
| 1. Committee Information | MINE HER | enock in | Tax both | 1. 10 10 10 10 10 10 10 10 10 10 10 10 10 | THE SECOND PORTS IN |
| a. Full Name | | | 1000 | | c. ID Number |
| | 1 | _ 1 | | , | A 4 5 105 |
| (1/200 (2 mm) | THEF TO C | tel / SIV | 61 (m) | 1 \/ | GCDISD |
| b. Mailing Address (include City, State | and Zip Code) | • | | | d. Date Filed |
| 1215 PINE D NOW BORXI | VALLEY WR. | | | | 12/1/15 |
| in Plan | ,, , | | | ŀ | e. Phone Number |
| NEW BOKKI | , 11.6. 285 | 12 | | F | |
| | | | | | 252-649-1588 |
| 2. Report Year 3. Period Start | Date (mm/dd/yy) 4. P | eriod End Date | (mm/dd/yy) 5 | . Treasurei | Full Name |
| 2015 12/1/2 | 2015 | 12/10/15 | | Anne | 11 6 411 |
| 6. Type of Committee (Check O | | of Poport (cha | A and is an at | HSNLGY | t from one category) |
| Candidate Campaign Party | | | tate/County | | Referendum |
| | | 1000 | Organizatio | | Organizational |
| | I = ° | ty-five day | Quarterly | | Pre-referendum |
| Legal Expense Fund | | orimary | First | | Final |
| | Pre-e | election | Second | i | Supplemental Final |
| 7. Type of Fund (if applicable, of | check one) 💛 🔲 Pre-r | unoff | Third | | Annual |
| Booster Fund | Semi | -annual | Fourth | | Special |
| Building Fund | | Mid Year | Semi-annua | ı [| |
| _ | □ | Year End | Mid Y | ear | 10. Special Report Name |
| Other: | Final | <u>-</u> | Үеаг Е | nd | |
| 8. Number of Fundraisers this I | Report Speci | ial | Final | | |
| | | L | Special | | |
| M. Account Information | 就到的社 族。不是 | 11. Acco | unt Informa | tion | 的 员和10年《 第 00元代》 |
| a. Financial Institution Full Name | | a. Financia | I Institution F | ull Name | |
| WELLS FARGE | 7 | | 1 | | |
| b. Purpose FARG | c. Account Code | b. Purpose | | 10 | c. Account Code |
| CAMPAIGN FUNDS | | | 197 | | a riceount coue |
| CAMPAINA TONDS | 3 01- | | | | |
| | d. Period Begin Balance | | | d | l. Period Begin Balance |
| | \$ 77.00 | | | | \$ |
| CERTIFICATION | + 0, - | The state of the s | percentage and the second | ar recorded | Ψ |
| ************************************** | 1 · · · · · · · · · · · · · · · · · · · | | | | |
| I certify that the Committee or Fund of the NC General Statutes and that | a is in compliance with | all applicable provi | isions of Artic | cle 22A, 22B | & 22D-22M of Chapter 163 |
| report is complete, true and correct | and that He ve Keen tra | sined by the NC Sta | or other non- te Board of F | disclosed fun lections | ids. I further certify that this |
| , , , , , , , , , , , , , , , , , , , , | /// | anica by the ree sta | ite Board of L | dections. | |
| Land Mary | 1PD | Dayler 1 | 6 hard | 11. | 12/2/1 |
| Printed Name of Signer | r | Signature of Ap | pointed Treasur | er | Date |
| FOR OFFICE USE ONLY | Modeleyear variety of the | | | | |
| Date Received: | 11/15 | | 1/ | Deliv | very Method |
| Date Received: | 11-15 | Employee: | 8 | Townson. | Normal Mail |
| Date Postmarked: | · · | Employee: | | | Registered Mail |
| Date Postmarked. | diamatia , | Employee. | | ₩ I | Hand Delivered |
| Date Scanned: | 74.2 | Employee: | | | Electronically Filed |
| | | | | | Signer has not received |
| Date Data Entered: | | Employee: | | | |
| | distributani i | Employee. | 100 | r | nandatory training |
| Please Note: This form can | Andrew Manager and the second | April 1995 | mation such | | nandatory training |
| Please Note: This form can assistant t | not be used to amend | committee infor | | as the comn | nitte (113, 123) |
| assistant t | not be used to amend treasurer, custodian o | committee informati | on, or accou | as the comm | nitte 19412, 12 Land |
| assistant t | not be used to amend treasurer, custodian on the Statement of Organ | committee informati | on, or accou 00A-E) to m | as the comm | changes. |
| assistant t You must amend th | not be used to amend treasurer, custodian on the Statement of Organ | l committee information (CRO-21 | on, or accou 00A-E) to m | as the comm | nitte 19412, 12 Land |

Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No No

| 1. Committee Full Name (and Fund if applicable) | 2. Type of | Repo | rt 3. | ID N | umber |
|----------------------------------------------------------------|-----------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|------------------------------|
| CITIZON COMMITTION F. ELGG ASINGS | THE OY | SA | n Zational | | |
| Start of Election Cycle: January 1, 2014 | 2 | R | Total this eporting Period | | Total this Election Cycle |
| 4) Cash on Hand at Start | | \$ | -0- | \$ | -0- |
| <u>RECEIPTS</u> | | | and the factor | | |
| 5) Aggregated Contributions from Individuals | (CRO-1205) | \$ | | \$ | |
| 6) Contributions from Individuals | (CRO-1210) | \$ | 30000 | \$ | 300 % |
| 7) Contributions from Political Party Committees | (CRO-1220) | \$ | | \$ | |
| 8) Contributions from Other Political Committees | (CRO-1230) | \$ | | \$ | |
| 9) Loan Proceeds | (CRO-1410) | \$ | 3-1 | \$ | 335 |
| 10) Refunds/Reimbursements to the Committee | (CRO-1240) | \$ | | \$ | - |
| 11) Other Receipt Sources | | | | | |
| 11a) Interest on Bank Accounts | (CRO-1250) | \$ | | \$ | |
| 11b) Contributions from Not-For-Profit Organizations | (CRO-1250) | \$ | | \$ | |
| 11c) Outside Sources of Income | (CRO-1250) | \$ | | \$ | |
| 11d) Legal Expense Fund - Other Sources | (CRO-1270) | \$ | | \$ | |
| 11e) Exempt Purchase Price Sales | (CRO-1265) | \$ | | \$ | |
| 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c | | | 20000 | \$ | 30000 |
| <u>EXPENDITURES</u> | AND MORNING | Ψ | 300 | ļΨ | <i>20</i> 0 |
| 13) Disbursements | | 18:24:22 | Stage By Marine More to Marine | | |
| 13a) Operating Expenditures | (CRO-1310) | \$ | 68 02 | \$ | 18 02 |
| 13b) Contributions to Candidates/Political Committees | (CRO-1310) | \$ | 20 | \$ | 8 0 |
| 13c) Coordinated Party Expenditures | (CRO-1310) | \$ | | \$ | |
| 14) Aggregated Non-Media Expenditures | (CRO-1315) | \$ | | \$ | |
| 15) Loan Repayments | (CRO-1420) | \$ | | \$ | |
| 16) Refunds/Reimbursements from the Committee | (CRO-1320) | \$ | | \$ | |
| 17) In-Kind Contributions | (CRO-1510) | \$ | | \$ | |
| 18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 1 | | \$ | 6600 | \$ | 6600 |
| 19) Cash on Hand at End (Add lines 4 and 12 together, then sul | | \$ | 23400 | \$ | 23400 |
| ADDITIONAL INFORMATION | 1 | | 431- | Ι Ψ | 231 |
| 20) Non-Monetary Gifts Given to Other Committees | (CRO-1330) | \$ | | | |
| 21) Outstanding Loans (incl. ones from other campaigns) | (CRO-1430) | \$ | | | |
| 22) Debts and Obligations owed by the Committee | (CRO-1610) | \$ | | | |
| 23) Debts and Obligations owed to the Committee | (CRO-1620) | \$ | | | |
| 24) Account Transfers Within the Committee | (CRO-1720) | \$ | | | |
| 25) Administrative Support | (CRO-1710) | \$ | | \$ | |
| 26) Forgiven Loans | (CRO-1440) | \$ | | \$ | 1011121314 |
| 27) 48-Hour Notice Reports Sum | (CRO-2220) | \$ | | \$ | 40. |
| 28) Contributions to be Refunded | (CRO-1215) | \$ | | \$ | Davis |
| CRO-1100 NC State Boar | rd of Elections | | | -/- | Airoust 2008 |

| Cont | ributions fr | om Individual | ls | Pα | of | 8 | Amendment Yes No |
|-----------------------------------------|----------------------------------------------|-------------------------------------|--------------------|----------------------------------|----------------------|----------|--------------------|
| Use this | s form to report in | ndividual contribution | ns over \$50 or co | ontributions unde | | | |
| 1. Com | mittee Full Nam | e (and Fund if appl | icable) | 1 | | 2. 11 | Number |
| 77 | 4/2×1 (an | W171186 / | Clot / | VILLES OM | / | | |
| | iributor Informa ame, Mailing Addre | | <u> </u> | Add / Ren b. Job Title/Profes | | d. Co | omments |
| 9 (0.00) (0.00) | le city, state, & zip) | | 17.67 | | * | | |
| 1 | SULL. SY | 21/3/ | | c. Employer's Nan | | | |
| 1 | 215 PINA | E URLLES 60 | DR- | <i>A</i> . | | o 171 | ection Sum to Date |
| 1 | 1/00 188 | 21/2 E VALLEY B AN, NIC | 0.16 | KOTIROL | 0 | \$ | 300-00 |
| | | h. Form of Payment | | tion | j. Date (mm/dd/yyy | | |
| | / | B18TT | • | | 12/1/2015 | | \$ 30000 |
| | | 6 | | | | | \$ |
| | | | | | | | \$ |
| *************************************** | ributor Informa | | | Add Ren | nove | la c | omments |
| 100000000000000000000000000000000000000 | ame, Mailing Addre e city, state, & zip) | ss & Phone | . 其情觀 | b. Job 14tte/Profes | SION | a. C | omments |
| | | | | c. Employer's Nan | ne/Specific Field | | |
| | * | | | | | e. El | ection Sum to Date |
| | | | | | | \$ | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Descrip | tion | j. Date (mm/dd/yy | /y) | k. Amount |
| | | | | | | | \$ |
| | | | | | | | \$ |
| | | | | | | | \$ |
| | ributor Informa | | | | nove | 1 | 244人/全部660分词 |
| 0.0000000000000000000000000000000000000 | ime, Mailing Addres e city, state, & zip) | ss & Phone | | b, Job Title/Profes | sion | d. C | omments |
| | | | | c. Employer's Nan | no/Crossifia Field | | |
| | | | | c. Employer 8 Nan | ne/specific Field | | |
| | | | | | | ******** | ection Sum to Date |
| | | | | | | \$ | |
| f. Prior | g. Account Code | h. Form of Payment | i. In-Kind Descrip | tion | j. Date (mm/dd/yy | yy) | k. Amount |
| | | | | | | | \$ |
| | | | | | | | \$ |
| 4. Tota | al only this Pa | ige | 100 | ZATIVE: | | \$ | 300 |
| 5. Tota | d of ALL CR | O-1210 Pages of Detailed Summary Pa | we CRO-1100 | 671-41-16 | 167 | \$ | 300 22 |
| CRO-12 | | | NC State Boa | rd of Elections | 9202122 13076 222 | ed. | April 2007 |
| | | | 234 | DEC CLEASURE CL | CHOTE N | | |
| | | | | Egg. Bd. O' | 52.70° | | |
| | | | | 627282 | | | |

| Disburser | nents | | | | | Amendment | |
|------------------------|------------------------------------------------------|------------------------------------------|--------------------------|--------------------------------|------------------|-------------------------------|------|
| | to report expenditure | s from the commit | tee for operating a | Pg | of | Yes Yes | ✓ No |
| committees an | d coordinated party | expenditures. | acc for, operating ex | ipenses, | contributions to | candidate/political | |
| | Full Name (and Fu | | | | | 2. ID Number | |
| | ZON Commi | TIXX & EU | SCT /SSN4611 | m. | 1710 | | |
| 3. Type of Dis | | ase usé separate (| CRO-1310 forms fo | r each t | ype of Disbursen | nent.) | |
| 4. Payee Infor | | | andidates/Political Comn | ittees | | oordinated Party Expenditures | |
| | iling Address & Phone | X | Add b. Coordinated Com | | Remove | T. 2 | |
| (include city, state | | | b. Coordinated Com | mittee N | ате | d. Comments | |
| (monate enj, star | (Carrier - C 11 | 11000 | | | | | |
| CANLON | CROUDED STS | 0 81 (1841)N | c. Level Registered (| Specify) | | | |
| 408 | CRAVEN SIS | | Federal | X | County: | 7 | |
| 116 | N BERN, Nº | | State | | Municipality: | e. Election Sum to Date | |
| | | 28380 | | | | \$ 6822 | |
| f. Account Code | g. Form of Payment | h. Purpose Code | : Data (m.m./44/ | | T | | |
| Wittedant Code | g. Form of Layment | A - | i. Date (mm/dd/y | ууу) | j. Amount | k. Required Remarks | |
| 6(| EHECK | 9 D | 12/1/15 | | \$ 66 00 | Filing FEE | - |
| | | | 777 | | | 1 10/11g 1 EC | |
| | | | | | \$ | | |
| 4. Payee Infor | | | Add | | Remove | | |
| | ling Address & Phone | | b. Coordinated Com | mittee Na | ıme | d. Comments | |
| (include city, state | e, & zip) | | + | | | | |
| | | | c. Level Registered (S | Specify) | | - | |
| | | | Federal | | | | |
| | | | State | Ī | Municipality: | e. Election Sum to Date | |
| | | | | | | | |
| | T = - | | | | | \$ | |
| f. Account Code | g. Form of Payment | h. Purpose Code | i. Date (mm/dd/yy | i. Date (mm/dd/yyyy) j. Amount | | | |
| | | | | | \$ | | |
| | | | | | | | |
| | | | | | \$ | | |
| 4. Payee Inform | nation | | Add | | Remove | | |
| | ing Address & Phone | | b. Coordinated Com | nittee Na | me | d. Comments | |
| (include city, state, | , & zip) | | | | | | |
| | | | a Land Desire 16 | | | | |
| | | | c. Level Registered (S | pecity) | County: | | |
| | | | State | Н | Municipality: | e. Election Sum to Date | |
| | | | | | 1 | | |
| | | r | | | | \$ | |
| f. Account Code | g. Form of Payment | h. Purpose Code | 1112131495 | NO. | j. Amount | k. Required Remarks | |
| | | / | 910 | | \$ | | |
| | | | politica - | 0, | | | |
| | | | Becg. 3012 | 20 | \\$ | | |
| 5. Total only th | | Ø | DEC SUCO. | ns 27 | | \$ 6622 | |
| | CRO-1310 Pages | 12 | CLS Electr | N | | D. K. | |
| (This line goes in | line 13a of Detailed Sun line 13b of Detailed Sun | mary Page CRO-1NO | of Operating Expenses) | 10 / | | \$ | 1 |
| (This line goes in | line 13b of Detailed Sun line 13c of Detailed Sum | mary Page CKO-1100 mary Page CPO-1100 | entrib to Candidate | VP olitica. penditur | | \$ 6600 | |
| | es (List detailed ex | | | penattur | es) | <i>U</i> - | |
| A* - Media | B* - Printing | C* - Fund | raising | | D - To Anothe | er Candidate | |
| E - Salaries | F* - Equipment | G - Politic | al Party | | H* - Holding | Public Office Expenses | |
| I - Postage O* - Other | J - Penalties | K* - Office | e Expenses | | Q* - Donation | to Legal Expense Fund | |
| | e detailed explanati | on in required re | marks field (k) | | | | |